

Kentucky Transportation Cabinet Division of Motor Vehicle Licensing TITLE LIEN STATEMENT

O ORIGINAL FILING	O CONTINUATION Original File # Original File Date	O TERMINATION Original File # Original File Date
	Original File Date	Original i lie Date
Debtor(s) (Last Name First) and Address	2. Secured Party and Address	For Filing Officer (Date, Time, Number and Filing Officer)
4. Vehicle information:		
YEAR MODEL MAKE	VEHICLE IDENTIFICATION NUME	BER ADDITIONAL DESCRIPTION
 NOTE: (1) This is a multi-purpose form that can only be used once. A new form must be completed by the Secured Party upon termination of the lien. Further, this form can only be used for one piece of property. Signature of the secured party is only required for continuation or termination filling. (2) In compliance with KRS 186A.190 (2), "the notation of security interests relating to property required to be titled in Kentucky through the county clerk shall be done in the office of the county clerk of the county in which the debtor resides". 		
Authentication of Debtor(s)		Authentication of Secured Party(s) (Only for continuation or termination filing)
Date		Date
Optional for County clerk use		
Date Processed:		
Fees Collected:		
Clarks initials:		